Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 1 of 46

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|--|--|-----|--|
| | | About Debtor 1: | Ab | out Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Charmaine First name D. Middle name McElroy Last name and Suffix (Sr., Jr., II, III) | Mic | st name ddle name st name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4513 | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Page 2 of 46 Document

Case number (if known)

Debtor 1 Charmaine D. McElroy

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 561 Deer Park Circle, Apt. 109 Bartlett, IL 60103 | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Cook | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 3 of 46

Case number (if known) Debtor 1 Charmaine D. McElroy

| ⊃ar | t 2: Tell the Court About | Your Ba | nkruptcy Ca | ıse | | | |
|-----|---|---------|----------------------------------|--|---|--|---------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropria | v 11 U.S.C. § 342(b) for Individuals Filing for Bankrup te box. | otcy |
| | choosing to file under | ■ Ch | apter 7 | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | ☐ Ch | apter 12 | | | | |
| | | ☐ Ch | apter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subi | pically, if you are paying the fee y | ck with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or rhalf, your attorney may pay with a credit card or check | noney |
| | | | | | tallments. If you choose this optots (Official Form 103A). | ion, sign and attach the Application for Individuals to | Pay |
| | | | I request that but is not req | it my fee be wa uired to, waive y | aived (You may request this option | on only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li in installments). If you choose this option, you must f | ne that |
| | | | | | | icial Form 103B) and file it with your petition. | iii out |
|). | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When When | Case number | |
| | | | District | | when | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | |
| | residence : | ☐ Yes | s. Has yo | our landlord obta | ained an eviction judgment agair | st you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out <i>In</i> bankruptcy per | | Judgment Against You (Form 101A) and file it with t | his |
| | | | | | | | |

| | | Document | Page 4 of 46 | | |
|----------|----------------------|----------|--------------|------------------------|--|
| Debtor 1 | Charmaine D. McElroy | | 3 | Case number (if known) | |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Propriet | tor | | | |
|------|---|---|-------------------------------|--|---|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | e & ZIP Code | | | | |
| | it to this petition. | | Chec | Check the appropriate box to describe your business: | | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemen and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure. | | | | | | |
| | For a definition of amall | ■ No. | I am r | not filing under Chap | oter 11. | | | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Part | 4: Report if You Own or | Have Any | Hazardo | ous Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ Na | | | | | | |
| | property that poses or is | ■ No. | | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to public health or safety? | ☐ Yes. | What is | the hazard? | | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | | |
| | · | | | | Number, Street, City, State & Zip Code | | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 5 of 46

Debtor 1 Charmaine D. McElroy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 6 of 46 Case number (if known) Debtor 1 Charmaine D. McElroy Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

MM / DD / YYYY

Executed on

/s/ Charmaine D. McElroy

Executed on May 8, 2016

MM / DD / YYYY

Charmaine D. McElroy Signature of Debtor 1 Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 7 of 46

Debtor 1 Charmaine D. McElroy

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

| /s/ Lorraine Ashby | Date | May 8, 2016 | |
|--|---------------|-----------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Lauraina Aabbu | | | |
| Lorraine Ashby | | | |
| Printed name | | | |
| Lorraine Ashby | | | |
| | | | |
| 9837 S. Avenue H | | | |
| Chicago, IL 60617 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone 773/336-5671 | Email address | lashby7@att.net | |
| 6211631 | | | |
| Bar number & State | | | |

| | | 1200.11111 | HILL PAUE O UL 40 | |
|---------------------|--------------------------|-------------------|-------------------|-------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Charmaine D. Mc | Elroy | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |
| (if known) | | | | ☐ Che |
| | | | | ame |

ck if this is an nded filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | <u> </u> | | |
|-----|--|--------------------|--------------------------|
| Par | t1: Summarize Your Assets | | |
| | | Your as Value o | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 3,875.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 3,875.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 45,005.00 |
| | Your total liabilities | \$ | 45,005.00 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 753.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,664.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal | family, or |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Case 16-15657 Doc 1 Document

Page 9 of 46
Case number (if known) Debtor 1 Charmaine D. McElroy

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

0.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 3,155.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 3,155.00 |

| | | | Document | Page 10 of 46 | | |
|-------------------------------|--|--|--|---|----------------------------|--|
| Fill in | this inform | nation to identify your | case and this filing: | | | |
| Debto | r 1 | Charmaine D. Mo | :Elrov | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | | | | | | |
| (Spouse | e, if filing) | First Name | Middle Name | Last Name | | |
| United | d States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | |
| Cooo | | | | | | |
| Case | number _ | | | | | ☐ Check if this is an amended filing |
| | | | | | | amonaca ming |
| | | | | | | |
| Offic | <u>cial Fo</u> | rm 106A/B | | | | |
| Sch | redul | e A/B: Prop | ertv | | | 12/15 |
| n each think it informa | category, se fits best. Be ation. If more every quest | eparately list and describ e as complete and accura e space is needed, attach tion. | te items. List an asset only once ate as possible. If two married por a separate sheet to this form. On the control of the con | eople are filing together, both a On the top of any additional pag | re equally responsible for | supplying correct |
| r art r. | Describe | Lacii Nesiaciice, Danaiii | , Lana, or Other Real Estate 10 | u own or have an interest in | | |
| 1. Do y | ou own or h | ave any legal or equitable | e interest in any residence, build | ding, land, or similar property? | | |
| ■ N | lo Go to Part | 2 | | | | |
| | | the property? | | | | |
| | es. Where is | tille property: | | | | |
| Part 2: | Describe \ | Your Vehicles | | | | |
| | s, vans, tru lo | • | le, also report it on <i>Schedule</i> (| , | , | |
| 3.1 | Make: H | Honda | Who has an interest | in the property? Check one | | claims or exemptions. Put |
| | _ | Odyssey | Debtor 1 only | are preparty a check one | | ured claims on Schedule D: Claims Secured by Property. |
| | _ | 996 | Debtor 2 only | | Current value of the | |
| | Approximate | e mileage: 200 | ,000 Debtor 1 and Debto | or 2 only | entire property? | Current value of the portion you own? |
| _ | Other inform | nation: | ☐ At least one of the | debtors and another | | |
| | motor vel debtor | hicle: owned solely | Check if this is co | ommunity property | \$1,200.00 | \$1,200.00 |
| Exam N Y S Ad page | mples: Boat lo fes d the dollar ges you ha Describe | r value of the portion ve attached for Part 2. | TVs and other recreational vonal watercraft, fishing vessels you own for all of your entric. Write that number here | s, snowmobiles, motorcycle a | y entries for | \$1,200.00 Current value of the portion you own? Do not deduct secured |
| 6. Ho u | isehold ao | ods and furnishings | | | | claims or exemptions. |
| | | | , linens, china, kitchenware | | | |

□ No
Official Form 106A/B
Schedule A/B: Property

| Debtor 1 | Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Document Page 11 of 46 Case number (if known) | Desc Main |
|---------------------------|--|---------------------------------------|
| _ | Describe | |
| _ 100. | used household goods including; living room furniture including: sofa, bedroom furniture including: three beds and three dressers; Also kitchen table and 4 chairs. | \$800.00 |
| □ No | les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games Describe | |
| | one used television, one used dvr and several dvd's | \$125.00 |
| Example No | ibles of value iles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir other collections, memorabilia, collectibles Describe | n, or baseball card collections; |
| Example No | nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments Describe | and kayaks; carpentry tools; |
| ■ No | ms ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe | |
| □ No | ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe | |
| | wearing apparel for debtor and family including normal outerwear and underwear; not including any luxury items such as furs or jewelry | \$800.00 |
| ■ No | ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, Describe | gold, silver |
| Exam _i ■ No | arm animals ples: Dogs, cats, birds, horses | |
| 14. Any ot ■ No | Describe ther personal and household items you did not already list, including any health aids you did not list | |
| ☐ Yes. | . Give specific information | |
| | the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here | \$1,725.00 |
| | escribe Your Financial Assets | |
| Do you ov | wn or have any legal or equitable interest in any of the following? | Current value of the portion you own? |

Schedule A/B: Property

page 2

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 12 of 46 Debtor 1 Case number (if known) Charmaine D. McElroy Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... checking account at debtor's bank: Chase \$100.00 **Bank** 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

□ No Institution name or individual:

Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

security deposit with landlord:

■ No

\$800.00

| De | ebtor 1 | Charmaine D. McElroy | Document | Page 13 of 46 Case number (if known) | |
|-----|----------------|--|--------------------------|--|---|
| | ☐ Yes. | Give specific information about them | | | |
| 26. | | s, copyrights, trademarks, trade secret bles: Internet domain names, websites, pr | • | | |
| | ■ No □ Yes. | Give specific information about them | | | |
| | Examp ■ No | es, franchises, and other general intan oles: Building permits, exclusive licenses, Give specific information about them | | n holdings, liquor licenses, professional license | es |
| | | property owed to you? | | | Current value of the |
| | oney or | proporty chica to you. | | | portion you own? Do not deduct secured claims or exemptions. |
| | | unds owed to you | | | |
| | ■ No □ Yes. | Give specific information about them, incl | luding whether you alre | eady filed the returns and the tax years | |
| 29. | | support bles: Past due or lump sum alimony, spou | sal support, child supp | ort, maintenance, divorce settlement, property | settlement |
| | _ | Give specific information | | | |
| 30. | | amounts someone owes you oles: Unpaid wages, disability insurance p benefits; unpaid loans you made to s | | nefits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | ■ No □ Yes. | Give specific information | | | |
| 31. | | ts in insurance policies oles: Health, disability, or life insurance; h | ealth savings account | (HSA); credit, homeowner's, or renter's insuran | ce |
| | _ | Name the insurance company of each po Company name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a | terest in property that is due you from are the beneficiary of a living trust, expectione has died. | | ed nsurance policy, or are currently entitled to rece | ive property because |
| | ■ No □ Yes | Give specific information | | | |
| | | against third parties, whether or not y | ou have filed a lawsu | it or made a demand for payment | |
| | | oles: Accidents, employment disputes, ins | | | |
| | ☐ Yes. | Describe each claim | | | |
| 34. | Other o | contingent and unliquidated claims of | every nature, includir | ng counterclaims of the debtor and rights to | set off claims |
| | _ | Describe each claim | | | |
| 35. | | ancial assets you did not already list | | | |
| | ■ No □ Yes. | Give specific information | | | |
| 36 | | he dollar value of all of your entries fro | | nny entries for pages you have attached | \$950.00 |

Official Form 106A/B Schedule A/B: Property page 4

| | Case 16-15657 | Doc 1 | Filed 05/08/16 Document | Entered 0 Page 14 of | 5/08/16 17:56:18 46 | Desc Main | |
|--------------|---|-----------------------|----------------------------|-------------------------|---------------------------|---------------------|----|
| Debto | Charmaine D. McElro | ру | | | Case number (if known) | | |
| Part 5 | : Describe Any Business-Related | I Property You Ov | wn or Have an Interest | In. List any real esta | ate in Part 1. | | |
| 37 Do | you own or have any legal or equi | itable interest in | any business-related p | roperty? | | | |
| | No. Go to Part 6. | | , | | | | |
| П | es. Go to line 38. | | | | | | |
| | 66. GG 16 III G 66. | | | | | | |
| Part 6 | Describe Any Farm- and Commo | ercial Fishing-Re | lated Property You Ow | n or Have an Interes | st In. | | |
| | If you own or have an interest in fa | armland, list it in P | art 1. | | | | |
| 46. D | o you own or have any legal or | r equitable inte | rest in any farm- or | commercial fishir | g-related property? | | |
| | No. Go to Part 7. | | - | | | | |
| | Yes. Go to line 47. | | | | | | |
| | | | | | | | |
| Part 7 | Describe All Property You | Own or Have an | nterest in That You Di | d Not List Above | | | |
| | o you have other property of a examples: Season tickets, countr | | | | | | |
| | No | y club members | пр | | | | |
| | Yes. Give specific information | | | | | | |
| | | | | | 1 | | |
| 54. | Add the dollar value of all of yo | our entries fron | n Part 7. Write that n | umber here | | \$0.00 | _ |
| | | | | | | | _ |
| Part 8 | List the Totals of Each Part | of this Form | | | | | |
| 55. I | Part 1: Total real estate, line 2 | | | | | \$0.0 | 00 |
| 56. I | Part 2: Total vehicles, line 5 | | | \$1,200.00 | | · · | |
| 57. l | Part 3: Total personal and hou | sehold items, l | ine 15 | \$1,725.00 | | | |
| 58. I | Part 4: Total financial assets, li | ine 36 | _ | \$950.00 | | | |
| 59. I | Part 5: Total business-related | property, line 4 | 5 | \$0.00 | | | |
| 60. I | Part 6: Total farm- and fishing- | related propert | y, line 52 | \$0.00 | | | |
| 61. l | Part 7: Total other property no | t listed, line 54 | + | \$0.00 | | | |
| 62. | Total personal property. Add lir | nes 56 through 6 | 51 | \$3,875.00 | Copy personal property to | otal \$3,875 | 00 |
| 63. | Total of all property on Schedu | ule A/B. Add line | e 55 + line 62 | | | \$3 875 00 | _ |

Official Form 106A/B Schedule A/B: Property page 5

| | | I A A A A A A A A | 111 11111. 1.7 (7) 4 | |
|---------------------|--------------------------|-------------------|----------------------|------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Charmaine D. Mc | Elroy | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | □ CI |
| | | | | ar |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|---|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 1996 Honda Odyssey 200,000 miles motor vehicle: owned solely by | \$1,200.00 | | \$1,200.00 | 735 ILCS 5/12-1001(c) |
| debtor Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| used household goods including; living room furniture including: sofa, | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(b) |
| bedroom furniture including: three beds and three dressers; Also kitchen table and 4 chairs. Line from <i>Schedule A/B</i> : 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| one used television, one used dvr | \$125.00 | | \$125.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| wearing apparel for debtor and family including normal outerwear | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(a) |
| and underwear; not including any luxury items such as furs or jewelry Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 16 of 46 Case number (if known)

| | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----------------------------------|---|--|---|--|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| e nom <i>Schedule A/D</i> . 19:1 | | | 100% of fair market value, up to any applicable statutory limit | |
| • | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(b) |
| e Hotti Schedule A/B. 22.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | led on or after the date of adjustme | nt.) |
| _ , , , , , , | ed by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| ☐ Yes | | | | |
| | No Yes. Did you acquire the property cover No No No | portion you own Copy the value from Schedule A/B \$50.00 Schedule A/B \$50.00 Schedule A/B \$16.1 Curity deposit with landlord: see from Schedule A/B: 22.1 See you claiming a homestead exemption of more than \$160,37 subject to adjustment on 4/01/19 and every 3 years after that for can No Yes. Did you acquire the property covered by the exemption with the semption with the property covered by the exemption with the semption with the semption with the property covered by the exemption with the semption with the | portion you own Copy the value from Schedule A/B ash the from Schedule A/B: 16.1 Cucking account at debtor's bank: the from Schedule A/B: 17.1 Curity deposit with landlord: the from Schedule A/B: 22.1 | portion you own Copy the value from Schedule A/B that lists this property Solution Schedule A/B |

| Fill in this inform | mation to identify your | case: | | | |
|---------------------|-------------------------|-------------------|-------------|---|---------------------|
| Debtor 1 | Charmaine D. Mc | Elroy | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | Document | Page 1 | 8 of 46 | | |
|--|--|---|--|--|---|---|
| Fill in this i | nformation to identify your | case: | | | | |
| Debtor 1 | Charmaine D. Mc | Elroy | | | | |
| | First Name | Middle Name | Last Name | | _ | |
| Debtor 2 (Spouse if, filing | j) First Name | Middle Name | Last Name | | _ | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | LINOIS | | _ | |
| Case numb | er | | | | | theck if this is an mended filing |
| Schedu | | ho Have Unsecured | | | | 12/15 |
| any executory Schedule G: I Schedule D: (left. Attach th name and cas | y contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec e Continuation Page to this page se number (if known). | e Part 1 for creditors with PRIORIT that could result in a claim. Also li ired Leases (Official Form 106G). Dured by Property. If more space is lee. If you have no information to reg | ist executory o o not include needed, copy | contracts on Schedule any creditors with part the Part you need, fill it | A/B: Property (Offici ially secured claims out, number the en | al Form 106A/B) and on that are listed in tries in the boxes on the |
| | ist All of Your PRIORITY Un | | | | | |
| _ ′ | reditors have priority unsecure | d claims against you? | | | | |
| ■ No. G | So to Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| | ist All of Your NONPRIORIT | | | | | |
| 3. Do any o | reditors have nonpriority unsec | cured claims against you? | | | | |
| ☐ No. Y | ou have nothing to report in this p | art. Submit this form to the court with | your other sch | edules. | | |
| Yes. | | | | | | |
| unsecure | d claim, list the creditor separately | aims in the alphabetical order of the for each claim. For each claim listed ist the other creditors in Part 3.If you have the content of the | I, identify what | type of claim it is. Do not | list claims already inc | cluded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 Co | menity Bank/AshStwrt | Last 4 digits of acc | ount number | 9434 | | \$1,083.00 |
| Non | priority Creditor's Name D. Box 659705 | When was the debt | incurred? | to 2015 | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | n Antonio, TX 78265-9705 Taber Street City State Zlp Code | | file, the claim | is: Check all that apply | | |
| Who | incurred the debt? Check one. | | | | | |
| = [| Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and and | | ITY unsecure | d claim: | | |
| | Check if this claim is for a com | | | | | |
| deb Is th | t ne claim subject to offset? | ☐ Obligations arisin report as priority clair | | aration agreement or divo | orce that you did not | |
| IS (I | • | <u>-</u> ' ' ' | | ng plans, and other simila | ır debts | |
| _ · | | • | • | on credit card inc | | |
| = : | | - Other. opedity _ | • | | | _ |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 19 of 46

Debtor 1 Charmaine D. McElroy Case number (if know) 4.2 \$1,425.00 Comenity Bank/Lane Bryant Last 4 digits of account number 5054 Nonpriority Creditor's Name P.O. Box 659728 When was the debt incurred? to 2014 San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts purchases on store credit card including Other. Specify ☐ Yes clothes 4.3 9085 Comenity Bank/Torrid Last 4 digits of account number \$1,948.00 Nonpriority Creditor's Name P.O. Box 659584 When was the debt incurred? to 2014 San Antonio, TX 78265-9584 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No past purchases on store credit card of clothing; recent charges in March/April 2016 of web/phone and other items, unknown to debtor; possible fraudulent ☐ Yes Other. Specify charges by third party unknown to **CRDT First** \$860.00 4.4 Last 4 digits of account number debtor Nonpriority Creditor's Name P.O. Box 81315 When was the debt incurred? unknown Cleveland, OH 44181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify unknown to debtor ☐ Yes

Document Page 20 of 46 Debtor 1 Charmaine D. McElroy ase number (if know) unknown to Dept of Education/NELNET \$24,000.00 4.5 debtor Last 4 digits of account number Nonpriority Creditor's Name 121 S. 13th st. When was the debt incurred? 2008 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify student loans; in deferrment ☐ Yes 4.6 Firestone/Credit First N.A. Last 4 digits of account number 9182 \$860.00 Nonpriority Creditor's Name P.O Box 81344 When was the debt incurred? to 2014 Cleveland, OH 44188-0344 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No purchases on gas credit card including car ☐ Yes Other. Specify gas,etc. Charmaine Larry Adrian \$5,000.00 4.7 Last 4 digits of account number **McElroy** Nonpriority Creditor's Name 520 Edgewood Ln to 2014 When was the debt incurred? Elk Grove Village, IL 60007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify alleged unpaid rents

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 21 of 46 Case number (if know)

| DCDIO | Charmaine D. MicEiroy | | Case Humber (II know) | |
|-------|---|--|--|------------|
| 4.8 | Old Navy/Synchrony Bank Nonpriority Creditor's Name | Last 4 digits of account number | 2898 | \$3,155.00 |
| | P.O. Box 530942 | When was the debt incurred? | over 3 years | |
| | Atlanta, GA 30353-0942 | _ | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | Пол | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | ☐ Other. Specify | | |
| | | purchases | on store credit card including d accessories | |
| | | | unknown to | |
| 4.9 | Synchrony Bank /DiscTIRE | Last 4 digits of account number | debtor | \$500.00 |
| | Nonpriority Creditor's Name | _ | | |
| | P.O. 965036 Orlando, FL 32896 | When was the debt incurred? | 2016 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | - • | |
| | Yes | Other. Specify purchase of | on car tire company credit card | |
| 4.1 | Synchrony Bank/H H Gregg | Last 4 digits of account number | 0721 | \$3,020.00 |
| | Nonpriority Creditor's Name | _ | | |
| | P.O. Box 960061 Orlando, FL 32896-0061 | When was the debt incurred? | to 2014 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | | purchases | on store credit card including | |
| | ☐Yes | furniture o | ver 5 years; debtor no longer has e; television broke and was | |

Debtor 1 Charmaine D. McElroy

Document Page 22 of 46
Case number (if know)

| 4.1 1 | Synchrony Bank/ONDC | Last 4 digits of account number | unknown to debtor | \$3,154.00 |
|----------|--|--|---|-------------------------|
| | Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896 | When was the debt incurred? | to 2015 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify sstore cre | o debtor; possible charges on dit card | |
| is t | 2: List Others to Be Notified About a Dethis page only if you have others to be notified rying to collect from you for a debt you owe to see more than one creditor for any of the debts the lified for any debts in Parts 1 or 2, do not fill out | about your bankruptcy, for a debt that someone else, list the original creditor i lat you listed in Parts 1 or 2, list the add | n Parts 1 or 2, then list the collection agency h | nere. Similarly, if you |
| | e and Address | On which entry in Part 1 or Part 2 did yo | u list the original creditor? | |
| | tEDNELNET | Line 4.5 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | S |
| | 5 Parker Rd 400 | | Part 2: Creditors with Nonpriority Unsecured Cl | aims |
| Auro | ora, CO 80014 | Last 4 digits of account number | | |
| | e and Address C Bus Svcs. Inc. | On which entry in Part 1 or Part 2 did yo Line 4.8 of (<i>Check one</i>): | u list the original creditor? Part 1: Creditors with Priority Unsecured Claim: | e |
| | . Box 24739 | | Part 2: Creditors with Nonpriority Unsecured Cl | |
| Jacl | ksonville, FL 32241-4739 | Last 4 digits of account number | 6714 | aiiis |
| | | Last 1 digits of account number | 07 14 | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|--|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 3,155.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 6g. | \$ 0.00 |
| | 6h. | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 41,850.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 45,005.00 |

| | | DOGUITE | III Paue 73 01 40 | |
|---------------------|--------------------------|-------------------|-------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Charmaine D. Mo | Elroy | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 24 of 46

| | | <u> </u> | <u>III Paue 74 0</u> | 1 4() | |
|---|--|---|---|--|---|
| Fill in this in | formation to identify your | | | | |
| Debtor 1 | Charmaine D. Mc | Elroy | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | | |
| Case number | · | | | | eck if this is an |
| Official | Town 10611 | | | am | nended filing |
| | Form 106H le H: Your Cod | ebtors | | | 12/15 |
| ■ No □ Yes 2. Within Arizona, ■ No. Go □ Yes. □ 3. In Columnin line 2 | California, Idaho, Louisiana, o to line 3. Did your spouse, former | I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | operty state or territory erto Rico, Texas, Washing with you at the time? spouse as a codebtor tor or cosigner. Make s | /? (Community property states and te | st the person shown Schedule D (Official |
| out Colu | mn 2. | , o | (| | |
| | <i>lumn 1:</i> Your codebtor ne, Number, Street, City, State and Z | P Code | | Column 2: The creditor to whom Check all schedules that apply: | n you owe the debt |
| Nur City | mber Street | State | ZIP Code | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line | - |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | _ |
| Nar | me | | | ☐ Schedule E/F, line ☐ Schedule G, line ☐ | |
| Nur | mber Street | | | - | - |
| City | | State | ZIP Code | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 25 of 46

| Fill | in this information to identify your ca | ase: | | | | | | | | |
|--------------------|--|--|--|------------------------|----------------|--|-----------------|-------------------|------------------------------|-----------------|
| Del | otor 1 Charmaine I | D. McElroy | | | _ | | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | | |
| | se number | | | | | Check if this is: An amende A supplement | d fili ent s | howin | ng postpetition | |
| O ⁱ | fficial Form 106I | | | | | MM / DD/ Y | | | ollowing date. | |
| | chedule I: Your Inc | ome | | | | MINI / DD/ Y | YYY | | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing r spouse is not filing with | ng jointly, and your s th you, do not inclu | spouse is de inforn | s liv natio | ing with you, incl on about your spo | ude ouse | inforr . If me | mation about ore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or ı | non-fi | iling spouse | |
| | If you have more than one job, | Employment status | ☐ Employed | | | ☐ Emple | oyed | | | |
| | attach a separate page with information about additional | Limployment status | ■ Not employed | | | ☐ Not e | mplo | yed | | |
| | employers. | Occupation | disabled | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | |
| | | How long employed th | nere? | | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | ou have nothing to re | eport for a | any I | ine, write \$0 in the | spa | ce. Ind | clude your no | n-filing |
| - | u or your non-filing spouse have mo e space, attach a separate sheet to | | mbine the information | n for all e | mplo | oyers for that perso | n on | the li | ines below. If | you need |
| | | | | | | For Debtor 1 | | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | S | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 0.00 | | \$ | N/A | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 26 of 46

| Deb | otor 1 | Charmaine D. McElroy | _ | Cas | e number (if kn | own) | | | | |
|-----|----------------|--|----------|------|-----------------|------|-----------|------------|-----------------|---------|
| | | | | E | or Debtor 1 | | For | Debtor | 2 or | |
| | | | | | n Debtoi i | | | n-filing s | | |
| | Cop | y line 4 here | 4. | \$ | C | .00 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . \$ | 0 | .00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0 | .00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0 | .00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0 | .00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0 | .00 | \$_ | | N/A | |
| | 5g. | Union dues | 5g. | _ | | .00 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h. | + \$ | 0 | .00 | + \$_ | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0 | .00 | \$_ | | N/A | |
| 7. | Calc | rulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0 | .00 | \$_ | | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total mostly act income. | 90 | ¢ | • | | ¢ | | NI/A | |
| | Oh | monthly net income. Interest and dividends | 8a. | | | .00 | \$_ \$ | | N/A | |
| | 8b. 8c. | Family support payments that you, a non-filing spouse, or a dependent | 8b. | Φ | U | .00 | Φ_ | | N/A | |
| | 00. | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | _ | | | | | | |
| | | settlement, and property settlement. | 8c. | | | .00 | \$_ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | | | .00 | \$_ | | N/A | |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive | 8e. | \$ | /53 | 3.00 | \$_ | | N/A | |
| | OI. | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0 | .00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0 | .00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h. | + \$ | C | .00 | + \$ _ | | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 753 | 3.00 | \$_ | | N/A | |
| 10 | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | 753.00 | + \$ | | N/A | = \$ | 753.00 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | .0. | | 7 33.00 | ` °- | | IVA | | 7 33.00 |
| 11. | State Inclu | e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not | depe | | | | , | | J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | 12. | \$ | 753.00 |
| 13. | Do v | rou expect an increase or decrease within the year after you file this form | 2 | | | | | | Combine monthly | |
| 13. | y | No. | | | | | | | | |
| | _ | Yes Explain: | | | | | | | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 27 of 46

| HILE. | in this informa | tion to identify yo | ur caca: | | | I | | |
|-------------|---|---|-----------------------|--|--|-------------|------------------------------------|---|
| Deb | | | | | | Ch | and if this in | |
| Deb | IOI I | Charmaine D | . WICEIRC | by | | | eck if this is: An amended filing | |
| | tor 2 buse, if filing) | | | | | | | wing postpetition chapter the following date: |
| ` . | , | | | | | | | |
| Unite | ed States Bankr | ruptcy Court for the: | NORTH | IERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| 1 | e numbe r nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| | | J: Your E | | | | | | 12/1 |
| info | rmation. If m | | eded, atta | . If two married people ar ich another sheet to this n. | | | | |
| Part | t 1: Descr | ibe Your House | hold | | | | | |
| 1. | Is this a joir | nt case? | | | | | | |
| | ■ No. Go to | | | ata haysada 140 | | | | |
| | ⊔ Yes. Doe | s Debtor 2 live i | n a separ | ate nousenoid? | | | | |
| | | | t file Offic | al Form 106J-2, Expenses | for Separate House | ehold of De | ebtor 2. | |
| 2. | | e dependents? | □ No | • | • | | | |
| | Do not list Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Daughter | | 3 | Yes |
| | | | | | Son | | 10 | □ No ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do your eyr | enses include | _ | | | | | ☐ Yes |
| ٥. | expenses of | f people other th | nan _ | No Yes | | | | |
| | yourself and | d your depender | nts? □ | res | | | | |
| Esti exp | imate your ex enses as of a | | ur bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| арр | licable date. | | | | | | | |
| the | lude expense value of such ficial Form 10 | n assistance and | on-cash d have ind | government assistance i cluded it on <i>Schedule I:</i>) | f you know 'our Income | | Your exp | enses |
| 4. | | or home owners! and any rent for the | | ses for your residence. In | nclude first mortgag | e 4. | \$ | 700.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | , or renter | 's insurance | | 4b. | · · · — | 0.00 |
| | | | | upkeep expenses | | 4c. | · | 0.00 |
| 5. | | owner's associati | | dominium dues our residence, such as ho | me equity loans | 4d. 5. | | 0.00 |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 28 of 46

| Deptoi | Cnarma | ine D. McElroy | Case num | ber (if known) | |
|-------------|-----------------------------------|--|-------------------------|--------------------|---------------------------|
| 6. U | tilities: | | | | |
| - | | , heat, natural gas | 6a. | \$ | 165.00 |
| | | wer, garbage collection | 6b. | | 0.00 |
| 6 | - | e, cell phone, Internet, satellite, and cable services | 6c. | | 45.00 |
| _ | d. Other. Sp | | 6d. | · | 0.00 |
| - | | ekeeping supplies | 7. | \$ | 400.00 |
| | | children's education costs | 8. | \$ | 35.00 |
| | | lry, and dry cleaning | 9. | · | 65.00 |
| | | products and services | 10. | | |
| | | ntal expenses | 11. | · | 0.00 |
| | | • | 11. | Φ | 0.00 |
| | ransportation to not include c | Include gas, maintenance, bus or train fare. | 12. | \$ | 175.00 |
| | | clubs, recreation, newspapers, magazines, and books | 13. | · | 25.00 |
| | | tributions and religious donations | 14. | · - | 0.00 |
| | nsurance. | inbutions and religious donations | 14. | Ψ | 0.00 |
| - | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | 5a. Life insura | | 15a. | \$ | 0.00 |
| | 5b. Health ins | | 15b. | | 0.00 |
| | 5c. Vehicle in | | 15b. | · | 54.00 |
| | 5d. Other insu | | 15d. | · | 0.00 |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. | 130. | Ψ | 0.00 |
| | pecify: | icidde taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| | | ease payments: | | Ψ | 0.00 |
| | | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | | ents for Vehicle 2 | 17b. | • | 0.00 |
| | 7c. Other. Sp | | 17c. | · | 0.00 |
| | 7d. Other. Sp | • | 17d. | · | |
| | | ecily. of alimony, maintenance, and support that you did not report a | | Φ | 0.00 |
| | | your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | | \$ | 0.00 |
| | | s you make to support others who do not live with you. | • | \$ | 0.00 |
| | pecify: | you mane to support outside the first the first terms of the first ter | 19. | | 0.00 |
| | ' ' | erty expenses not included in lines 4 or 5 of this form or on Sch | | our Income | |
| | | s on other property | 20a. | | 0.00 |
| | 0b. Real esta | | 20b. | | 0.00 |
| | | homeowner's, or renter's insurance | 20c. | | 0.00 |
| | | nce, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | ner's association or condominium dues | 20a. 20e. | · | 0.00 |
| | | ici s association di condominium dues | | · | |
| i. C | ther: Specify: | | 21. | τ φ | 0.00 |
| 2. C | alculate your | monthly expenses | | | |
| | 2a. Add lines 4 | · · · | | \$ | 1,664.00 |
| | | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | | a and 22b. The result is your monthly expenses. | | \$ | 1,664.00 |
| _ | _0. / (GG III IC ZZ | a and 225. The result to your monthly expenses. | | | 1,004.00 |
| 3. C | alculate your | monthly net income. | | | |
| 2 | 3a. Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 753.00 |
| 2 | 3b. Copy you | r monthly expenses from line 22c above. | 23b. | -\$ | 1,664.00 |
| | | | | | |
| 2 | | our monthly expenses from your monthly income. | | | 044.00 |
| | The result | t is your monthly net income. | 23c. | \$ | -911.00 |
| | | | | | |
| | | an increase or decrease in your expenses within the year after y | | | so or doorooss bossuss s |
| | | ou expect to finish paying for your car loan within the year or do you expect you terms of your mortgage? | ui mortgage į | payment to increas | se of decrease decause of |
| _ | _ | tornio or your mortgago: | | | |
| | | [e | | | |
| m | | terms of your mortgage? | ur mongage _l | sayment to mercus | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 29 of 46

| Fill in this infor | mation to identify your | case: | | | |
|--------------------------------------|---|--------------------------|----------------------------|---------------------------|---|
| Debtor 1 | Charmaine D. Mo | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official Forr | m 106Dec | | | | |
| Declarat | ion About a | an Individual | Debtor's Sc | hedules | 12/15 |
| obtaining money years, or both. 1 | | n connection with a bank | | | nt, concealing property, or or imprisonment for up to 20 |
| Did you pa | y or agree to pay some | eone who is NOT an attor | ney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | | otcy Petition Preparer's Notice, d Signature (Official Form 119) |
| | ilty of perjury, I declare e true and correct. | that I have read the sum | mary and schedules filed | d with this declaration a | nd |
| X /s/ Cha | armaine D. McElroy | | X | | |

Signature of Debtor 2

Date

Charmaine D. McElroy Signature of Debtor 1

Date May 8, 2016

| Fill in t | his inform | nation to identify you | r case: | | | | | |
|---------------------|-------------------------------|------------------------------------|--|-----------|--|--|-----------|---|
| Debtor | 1 | Charmaine D. M | cElrov | | | | | |
| | | First Name | Middle Name | | Last Name | | | |
| Debtor (Spouse i | | First Name | Middle Name | | Last Name | | | |
| United | States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILL | LINOIS | | | |
| Case n | umber | | | | | | | |
| (if known) | _ | | | | | | _ | heck if this is an mended filing |
| | | | | | | • | | |
| Offic | ial Fo | rm 107 | | | | | | |
| State | ement | of Financial | Affairs for Indiv | idua | Is Filing for B | ankruptcy | | 4/1 |
| informa | tion. If m | | ible. If two married people , attach a separate sheet t stion. | | | | | |
| Part 1: | Give D | etails About Your Ma | arital Status and Where Yo | ou Live | d Before | | | |
| 1. Wh | nat is your | current marital state | us? | | | | | |
| | Married | | | | | | | |
| | Not mar | ried | | | | | | |
| 2. Du | ring the la | ast 3 years, have you | lived anywhere other than | n wher | e you live now? | | | |
| | No | | | | | | | |
| | | t all of the places you | lived in the last 3 years. Do | not incl | ude where you live now | ·. | | |
| De | ebtor 1 Pri | ior Address: | Dates Debtor lived there | 1 | Debtor 2 Prior Ad | dress: | | Dates Debtor 2 lived there |
| | | sbury Dr., Unit A ark, IL 60133 | From-To: 2011 to Octo 2015 | ber, | ☐ Same as Debtor 1 | | | ☐ Same as Debtor 1 From-To: |
| | nd territori No Yes. Ma | es include Arizona, Ca | ver live with a spouse or la alifornia, Idaho, Louisiana, N hedule H: Your Codebtors (| levada, | New Mexico, Puerto Ri | | | |
| | | | | | | | | |
| Fill | in the tota | I amount of income yo | mployment or from operate or received from all jobs and have income that you rece | d all bus | sinesses, including part- | time activities. | ous calen | dar years? |
| | No | | | | | | | |
| | Yes. Fill | in the details. | | | | | | |
| | | | Debtor 1 | | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | (be | ross income efore deductions and clusions) | Sources of incom Check all that apply | | Gross income (before deductions and exclusions) |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Page 31 of 46 Case number (if known) Document Debtor 1 Charmaine D. McElroy Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Soc. Sec. Disability \$3,765.00 the date you filed for bankruptcy: For last calendar year: Soc. Sec. Disability \$9,035.00 (January 1 to December 31, 2015) For the calendar year before that: Soc. Sec. Disability \$9.036.00 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

Yes. List all payments to an insider.

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe

Entered 05/08/16 17:56:18 Desc Main Case 16-15657 Doc 1 Filed 05/08/16

Page 32 of 46 Case number (if known) Document Debtor 1 Charmaine D. McElroy

| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | account of a de | ebt that benefited an |
|-----|--|------------------------------|----------------------|----------------------|----------------------------|------------------------------|
| | No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. | | erty repossessed, f | oreclosed, garni | shed, attached | d, seized, or levied? |
| | ☐ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | l | | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | luding a bank or fir | nancial institutio | n, set off any a | nmounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date take | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | | erty in the possess | ion of an assigne | ee for the bene | efit of creditors, a |
| | ■ No □ Yes | | | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | |
| | Within 2 years before you filed for bankrup ■ No | otcy, did you give any gifts | s with a total value | of more than \$60 | 00 per person | ? |
| | ☐ Yes. Fill in the details for each gift. | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date the g | s you gave gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con | | s or contributions v | with a total value | of more than | \$600 to any charity? |
| | Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | ı contributed | | s you ributed | Value |
| Par | t 6: List Certain Losses | | | | | |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Page 33 of 46 Case number (if known) Document Debtor 1 Charmaine D. McElroy or gambling? Nο Yes. Fill in the details. Describe any insurance coverage for the loss Describe the property you lost and Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Lorraine Ashby \$300 5/7/16 \$300.00 9837 S. Avenue H Chicago, IL 60617 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment **Address** transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. Describe any property or **Person Who Received Transfer** Description and value of Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust Description and value of the property transferred Date Transfer was made

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Page 34 of 46
Case number (if known) Document

Debtor 1 Charmaine D. McElroy

| Pai | rt 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Sto | rage Units | | |
|-----|--|---|------------------------------|---------------------|---|---|
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc | or other financial accou | nts; certificates | of deposit; s | | , , |
| | No | Jianons, and other ima | iiciai iiisiitutioiis |)• | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accourant instrument | ci m | ate account was losed, sold, loved, or ansferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed fo | r bankruptcy, an | y safe depos | sit box or other depos | sitory for securities, |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | Describe the | e contents | Do you still have it? |
| 22. | Have you stored property in a storage unit of | or place other than you | r home within 1 y | year before y | ou filed for bankrupt | cy? |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe the | contents | Do you still have it? |
| Poi | rt 9: Identify Property You Hold or Control | for Somoone Elec | | | | |
| 23. | | | ude any property | y you borrow | ved from, are storing | for, or hold in trust |
| | No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, S Code) | | Describe the | e property | Value |
| Pai | rt 10: Give Details About Environmental Info | ormation | | | | |
| | the purpose of Part 10, the following definition | | | | | |
| | Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these | ne air, land, soil, surfac | e water, ground | | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispo | as defined under any | | w, whether | you now own, operat | e, or utilize it or used |
| | Hazardous material means anything an envi hazardous material, pollutant, contaminant, | | as a hazardous v | waste, hazar | dous substance, tox | ic substance, |
| Rep | oort all notices, releases, and proceedings tha | at you know about, reg | ardless of when | they occurre | ed. | |
| 24. | Has any governmental unit notified you that | you may be liable or p | otentially liable ι | under or in v | iolation of an enviror | nmental law? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental ur Address (Number, S | | Environr know it | nental law, if you | Date of notice |

ZIP Code)

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Page 35 of 46 Document Case number (if known) Debtor 1 Charmaine D. McElroy 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charmaine D. McElroy Signature of Debtor 2 Charmaine D. McElroy Signature of Debtor 1 Date May 8, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

> _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Yes. Name of Person

Official Form 107

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Page 36 of 46
Case number (if known) Document

Debtor 1 Charmaine D. McElroy

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 37 of 46

| Debtor 1 | Charmaine D. Mc | | | |
|----------------------------------|--------------------------|-------------------|-------------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Backer Case number | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| if known) | | | | ☐ Check if this is ar amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | <u>_</u> |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 38 of 46

| Debtor 1 | Charmaine D. McElroy | Case number (if known | | |
|------------------------------------|--|--|------------------------------------|--|
| proper | ption of | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | |
| n the info | ormation below. Do not list real estate le | Leases but listed in Schedule G: Executory Contracts and Unexpiral ases. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p) | ne lease period has not yet ended. | |
| Describe | your unexpired personal property lease | es | Will the lease be assumed? | |
| Lessor's Descripti Property: | on of leased | | □ No □ Yes | |
| Lessor's Descripti Property: | on of leased | | □ No □ Yes | |
| Lessor's Descripti Property: | on of leased | | □ No □ Yes | |
| Lessor's Descripti Property: | on of leased | | □ No □ Yes | |
| Lessor's Descripti Property: | on of leased | | □ No □ Yes | |
| Lessor's Descripti Property: | on of leased | | □ No | |
| Lessor's Descripti Property: | on of leased | | □ No | |
| Part 3: | Sign Below | | | |
| Jnder pe property | nalty of perjury, I declare that I have indi that is subject to an unexpired lease. | cated my intention about any property of my estate that so | ecures a debt and any personal | |
| Cha | Charmaine D. McElroy armaine D. McElroy nature of Debtor 1 | Signature of Debtor 2 | | |
| Date | e May 8 2016 | Date | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 43 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Charmaine D. McElroy | | Case No. | | |
|--------|--|---------------------------------------|------------------------|------------------------|-----------------|
| | - | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR DE | EBTOR(S) | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation o | g of the petition in bankruptcy | , or agreed to be paid | to me, for services r | |
| | For legal services, I have agreed to accept | | \$ | 300.00 | |
| | Prior to the filing of this statement I have received | | | 300.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are mem | bers and associates of | of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to rer | nder legal service for all aspec | ts of the bankruptcy c | ase, including: | |
| t c | a. Analysis of the debtor's financial situation, and renderb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of creditord. [Other provisions as needed] | ement of affairs and plan which | h may be required; | - | kruptcy; |
| 6. I | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding. | | | es, relief from sta | y actions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement for | r payment to me for r | epresentation of the | debtor(s) in |
| М | lay 8, 2016 | /s/ Lorraine Ashk | | | |
| D | Pate (1997) | Lorraine Ashby 6 Signature of Attorna | | | |
| | | Lorraine Ashby | ey | | |
| | | 9837 S. Avenue I | | | |
| | | Chicago, IL 6061 773/336-5671 | 7 | | |
| | | lashby7@att.net | | | |
| | | Name of law firm | | | |

Case 16-15657 Doc 1 Filed 05/08/16 Entered 05/08/16 17:56:18 Desc Main Document Page 44 of 46

United States Bankruptcy Court Northern District of Illinois

| In re | Charmaine D. McElroy | | Case No. | | |
|-------|--|---|---------------------------|----------------|--|
| | | Debtor(s) | Chapter 7 | | |
| | VE | RIFICATION OF CREDITOR MA | TRIX | | |
| | Number of Creditors: 13 | | | | |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | rs is true and correct to | the best of my | |
| Date: | May 8, 2016 | /s/ Charmaine D. McElroy Charmaine D. McElroy Signature of Debtor | | | |

Comenity Bank/AshStwrt P.O. Box 659705 San Antonio, TX 78265-9705

Comenity Bank/Lane Bryant P.O. Box 659728 San Antonio, TX 78265-9728

Comenity Bank/Torrid P.O. Box 659584 San Antonio, TX 78265-9584

CRDT First P.O. Box 81315 Cleveland, OH 44181

Dept of Education/NELNET 121 S. 13th st. Lincoln, NE 68508

DeptEDNELNET 3015 Parker Rd 400 Aurora, CO 80014

Firestone/Credit First N.A. P.O Box 81344 Cleveland, OH 44188-0344

Larry Adrian 520 Edgewood Ln Elk Grove Village, IL 60007

NCC Bus Svcs. Inc. P.O. Box 24739 Jacksonville, FL 32241-4739

Old Navy/Synchrony Bank P.O. Box 530942 Atlanta, GA 30353-0942

Synchrony Bank /DiscTIRE P.O. 965036 Orlando, FL 32896

Synchrony Bank/H H Gregg P.O. Box 960061 Orlando, FL 32896-0061

Synchrony Bank/ONDC P.O. Box 965005 Orlando, FL 32896